

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)							Serial No. 09/423436	Filing Date				
							Applicant(s)					
							Claims					
	As Filed		After 1st Amendment		After 2nd Amendment		IND.	DEP.	IND.	DEP.	IND.	DEP.
	IND.	DEP.	IND.	DEP.	IND.	DEP.						
1	1						51					
2	1						52					
3	12						53					
4	21						54					
5	12						55					
6	67						56					
7	181						57					
8							58					
9							59					
10							60					
11							61					
12							62		1			
13							63					
14							64					
15							65					
16							66					
17							67					
18							68					
19							69					
20							70					
21							71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28							78		1			
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.	1						TOTAL IND.					
TOTAL DEP.	6	↔	↔	↔	↔	↔	TOTAL DEP.	↔	↔	↔	↔	↔
TOTAL CLAIMS	7	0	0	0	0	0	TOTAL CLAIMS	0	0	0	0	0